

Special Act No. 18-2

AN ACT ESTABLISHING A TASK FORCE TO STUDY THE NEEDS OF PERSONS WITH INTELLECTUAL DISABILITY AND PILOT PROGRAMS TO ESTABLISH AND EVALUATE ALTERNATIVE SERVICE MODELS FOR PERSONS WITH INTELLECTUAL DISABILITY.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. (*Effective from passage*) (a) There is established a task force to study (1) the short-term and long-term needs of adults with intellectual disability, including, but not limited to, such adults with significant behavioral health issues or significant issues related to aging, including Alzheimer's disease, dementia and related disorders, and (2) ways in which the services and support such adults need may be provided.

- (b) The task force shall consist of the following members:
- (1) Two appointed by the speaker of the House of Representatives, one of whom has expertise in the diagnosis, care and treatment of persons with intellectual disability and one of whom has expertise in the provision of residential services to persons with intellectual disability;
 - (2) Two appointed by the president pro tempore of the Senate, one

of whom has expertise in the provision of day services for persons with intellectual disability and one of whom has expertise in the provision of program support services to persons with intellectual disability;

- (3) One appointed by the majority leader of the House of Representatives, who is the parent, guardian or relative of a person with intellectual disability who has high-level needs;
- (4) One appointed by the majority leader of the Senate, who is the parent, guardian or relative of a person with intellectual disability;
- (5) One appointed by the minority leader of the House of Representatives, who is the parent, guardian or relative of a person with intellectual disability;
- (6) One appointed by the minority leader of the Senate, who is the parent, guardian or relative of a person with intellectual disability who has high-level needs;
- (7) The chairpersons and ranking members of the joint standing committee of the General Assembly having cognizance of matters relating to public health, or their designees;
- (8) The Commissioner of Developmental Services, or the commissioner's designee; and
- (9) The Secretary of the Office of Policy and Management, or the secretary's designee.
- (c) Any member of the task force appointed under subdivision (1), (2), (3), (4), (5), (6) or (7) of subsection (b) of this section may be a member of the General Assembly.
- (d) All appointments to the task force shall be made not later than thirty days after the effective date of this section. Any vacancy shall be

filled by the appointing authority.

- (e) The speaker of the House of Representatives and the president pro tempore of the Senate shall select the chairpersons of the task force from among the members of the task force. Such chairpersons shall schedule the first meeting of the task force, which shall be held not later than sixty days after the effective date of this section.
- (f) The administrative staff of the joint standing committee of the General Assembly having cognizance of matters relating to public health shall serve as administrative staff of the task force.
- (g) Not later than January 1, 2019, the task force shall submit a report on its findings and recommendations to the joint standing committee of the General Assembly having cognizance of matters relating to public health, in accordance with the provisions of section 11-4a of the general statutes. The task force shall terminate on the date that it submits such report or January 1, 2019, whichever is later.
- Sec. 2. (Effective July 1, 2018) (a) The Department of Developmental Services shall establish, within available appropriations, up to three pilot programs that use alternative service models to serve individuals with intellectual disability who are eligible and waiting for residential services from the department. The pilot programs shall establish and evaluate alternative service models in which individuals who are currently receiving residential services may move from their existing residential setting, with the consent of the individual or such individual's legal representative, to a more independent, less restrictive residential setting. Such alternative service models may include, but need not be limited to, shared living arrangements, community companion homes or the use of assistive technology. The department shall work in collaboration with advocacy and nonprofit stakeholder organizations in establishing the pilot program.

- (b) The department shall select up to three qualified service providers to participate in the pilot program established under subsection (a) of this section. A service provider that wants to be selected for participation in the pilot program shall submit a proposal to the Department of Developmental Services. Selection of a service provider by the department shall be based on the proposals submitted. Any cost savings generated by a service provider through the pilot program may be retained and used by such service provider to meet the needs of other individuals eligible and waiting for residential services from the department or to improve or enhance the services such service provider provides to individuals with intellectual disability. Any service provider that seeks to retain and use cost savings under this subsection shall submit a plan for retention and use of such savings to the Commissioner of Developmental Services for approval.
- (c) Not later than January 1, 2019, and annually thereafter until the conclusion of the pilot program, the Commissioner of Developmental Services shall report, in accordance with the provisions of section 11-4a of the general statutes, to the joint standing committee of the General Assembly having cognizance of matters relating to public health regarding (1) the number of individuals served by the pilot program and the alternative service models chosen by such individuals, (2) the number of new individuals served by virtue of the cost savings generated through the pilot program and the residential or other services provided to such individuals, (3) other outcomes of the pilot program, and (4) recommendations of the department, stakeholder organizations and service providers based upon the outcomes of the pilot program. The pilot programs shall terminate on or before July 1, 2021, unless reauthorized by the General Assembly.

Approved May 24, 2018